

## **ITEMS NEEDED FOR PERMIT:**

- Zoning Fee of \$65.00
- Copy of Deed
- Address from Saginaw County Road Commission
- Driveway permit from Saginaw County Road Commission
- Septic/Well Permit from Saginaw County Health Department
- Copy of construction drawings-including floor plans and dimensions
- Address at site for inspectors
- Estimated project cost
- All Modular Homes must include approval reports from the State of Michigan for building, plumbing, mechanical and electrical.
- A site plan with plot dimensions where the house sets on the lot.

Date of Application \_\_\_\_\_

# ZONING PERMIT APPLICATION BIRCH RUN TOWNSHIP

**8425 Main St. | P.O. Box 152**

**Ph. #: (989) 624-9773 | Fax #: (989) 624-1177**

NAME\_\_\_\_\_

ADDRESS\_\_\_\_\_

PHONE (home)\_\_\_\_\_PHONE (work)\_\_\_\_\_

Tax Parcel # of lot \_\_\_\_\_ Zoning District\_\_\_\_\_

Application Fee \$65.00

Proposed use of parcel \_\_\_\_\_

- Attach a Scaled Drawing. Drawing may be on 8 ½ x 11 paper. Sketch your lot size (giving all dimensions), location of house, well, septic system or public utilities, driveway, and any easements, lake, river, stream, pond, county drain or other water impoundment. Also show the location of any neighboring wells and/or septic systems within 75' of your property. Be very specific as to the relationship between the lot size, house layout, and septic layout. Please show the distances (ft.) between the house location and property lines. If a scale is used, please indicate the dimensions used (e.g. 1" = 10'). Indicate all building dimensions. Give exact dimensions and height of proposed building. Please indicate North arrow.

The attached sketch is accurate and shows the layout of the property and any and all proposed construction. Any alterations(s) will need written approval by the Zoning Department

Applicant's Signature

Date \_\_\_\_\_

Office use only

Check one:

\_\_\_\_\_ Application approved

\_\_\_\_\_ Application denied

\*If the application is denied, a separate sheet listing reasons for denial will be attached.

Date: \_\_\_\_\_ Amount: \_\_\_\_\_ Check #: \_\_\_\_\_ Cash: \_\_\_\_\_

Signature Zoning Administrator

**TOWNSHIP OF BIRCH RUN**

8425 Main St. P.O. Box 152

Birch Run, MI 48415

**Phone (989)-624-9773 Fax (989)-624-1177****APPLICATION FOR BUILDING PERMIT AND PLAN EXAMINATION**

AUTHORITY: P.A. 230 of 1972, AS AMENDED	THE TOWNSHIP WILL NOT DISCRIMINATE AGAINST ANY INDIVIDUAL
COMPLETION: MANDATORY TO OBTAIN PERMIT	OR GROUP BECAUSE OF RACE, SEX, RELIGION, AGE, NATIONAL
PENALTY: PERMIT WILL NOT BE ISSUED	ORIGIN, COLOR, MARITAL STATUS, HANDICAP OR POKTICAL BELIEFS.

**APPLICANT TO COMPLETE ALL ITEMS IN SECTION I, II, III, IV, V AND VI**  
**NOTE: SEPARATE APPLICATIONS MUST BE COMPLETED**  
**FOR PLUMBING, MECHANICAL AND ELECTRICAL WORK PERMITS**

<b>I. PROJECT INFORMATION</b>				
PROJECT NAME		ADDRESS		
CITY	VILLAGE	TOWNSHIP	COUNTY	ZIP CODE
BETWEEN		AND		
<b>II. IDENTIFICATION</b>				
<b>A. OWNER OR LESSEE</b>				
NAME		ADDRESS		
CITY	STATE	ZIP CODE		TELEPHONE NUMBER
<b>B. ARCHITECT OR ENGINEER</b>				
NAME		ADDRESS		
CITY	STAE	ZIP CODE		TELEPHONE NUMBER
LICENSE NUMBER				EXPIRATION DATE
<b>C. CONTRACTOR</b>				
NAME		ADDRESS		
CITY	STAE	ZIP CODE		TELEPHONE NUMBER
BUILDERS LICENSE NUMBER				EXPIRATION DATE
FEDERAL EMPLOYER ID NUMBER OR REASON FOR EXEMPTION				
WORKERS COMP INSURANCE CARRIER OR REASON FOR EXEMPTION				
MESC EMPLOYER NUMBER OR REASON FOR EXEMPTION				
<b>III. TYPE OF IMPROVEMENT AND PLAN REVIEW</b>				
<b>A. TYPE OF IMPROVEMENT</b>				
1. ___ New Building      3. ___ Alterations      5. ___ Demolition      7. ___ Foundation Only      9. ___ Relocation				
2. ___ Addition      4. ___ Repair      6. ___ Mobile Home Set Up      8. ___ Premanufacture      10. ___ Special Inspection				
<b>B. REVIEW(S) TO BE PERFORMED</b>				
___ Building    ___ Electrical    ___ Mechanical    ___ Plumbing    ___ Foundation				
<b>IV. PROPOSED USE OF BUILDING</b>				
<b>A. RESIDENTIAL</b>				
1. ___ One Family      3. ___ Hotel, Motel      5. ___ Detached Garage				
___ No. of Units				
2. ___ Two or More Family      4. ___ Attached Garage      6. ___ Other _____				
___ No. of Units				

<b>B. NON-RESIDENTIAL</b>		
7. <input type="checkbox"/> Amusement	11. <input type="checkbox"/> Service Station	15. <input type="checkbox"/> School, Library, Educational
8. <input type="checkbox"/> Church, Religion	12. <input type="checkbox"/> Hospital, Institutional	16. <input type="checkbox"/> Store, Mercantile
9. <input type="checkbox"/> Industrial	13. <input type="checkbox"/> Office, Bank, Professional	17. <input type="checkbox"/> Tanks, Towers
10. <input type="checkbox"/> Parking Garage	14. <input type="checkbox"/> Public Utility	18. <input type="checkbox"/> Other _____
Nonresidential - describe in detail proposed use of building, e.g. food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.		

<b>V. SELECTED CHARACTERISTICS OF BUILDING</b>				
<b>A. PRINCIPAL TYPE OF FRAME</b>				
1. <input type="checkbox"/> Masonry, Wall Bearing 2. <input type="checkbox"/> Wood Frame 3. <input type="checkbox"/> Structural Steel				
4. <input type="checkbox"/> Reinforced Concrete 5. <input type="checkbox"/> Other _____				
<b>B. PRINCIPAL TYPE OF HEATING FUEL</b>				
6. <input type="checkbox"/> Gas 7. <input type="checkbox"/> Oil 8. <input type="checkbox"/> Electricity				
9. <input type="checkbox"/> Coal 10. <input type="checkbox"/> Other _____				
<b>C. TYPE OF SEWAGE DISPOSAL</b>				
11. <input type="checkbox"/> Public or Private Company 12. <input type="checkbox"/> Septic System				
<b>D. TYPE OF WATER SUPPLY</b>				
13. <input type="checkbox"/> Public or Private Company 14. <input type="checkbox"/> Private Well or Cistern				
<b>E. TYPE OF MECHANICAL</b>				
15. Will There Be Air Conditioning? <input type="checkbox"/> yes <input type="checkbox"/> no 16. Will There Be Fire Supression <input type="checkbox"/> yes <input type="checkbox"/> no				
<b>F. DIMENSIONS/DATA</b>				
17. Number of Stories _____	21. Floor Area	<u>Existing</u>	<u>Alterations</u>	<u>New</u>
18. Use Group _____	Basement	_____	_____	_____
19. Const Type _____	1st & 2nd Floor	_____	_____	_____
20. No. of Occupants _____	3rd-10th Floor	_____	_____	_____
	11th above	_____	_____	_____
	Total Area	_____	_____	_____
<b>G. NUMBER OF OFF STREET PARKING SPACES</b>				
22. ENCLOSED _____ 23. OUTDOORS _____				
<b>VI. APPLICANT INFORMATION</b>				
APPLICANT IS RESPONSIBLE FOR THE PAYMENT OF ALL FEES AND CHARGES APPLICABLE TO THIS APPLICATION AND MUST PROVIDE THE FOLLOWING INFORMATION				
NAME		TELEPHONE NUMBER		
ADDRESS	CITY	STATE		ZIP
FEDERAL I.D. NUMBER/SOCIAL SECURITY NUMBER				

I HEARBY CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS/HER AUTHORIZED AGENT, AND WE AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THE STATE OF MICHIGAN. ALL INFORMATION SUBMITTED ON THIS APPLICATION IS ACCURATE TO THE BEST OF MY KNOWLEDGE
Section 23a of the state construction code act of 1972, 1972 PA 230, MCL 125.1523A, prohibits a person from conspiring to circumvent the licensing requirements of this state relating to persons who are to perform work on a residential building or a residential structure. Violators of section 23a are subjected to civil fines.

SIGNATURE OF APPLICANT _____
PLAN REVIEW FEE ENCLOSED \$ _____
BUILDING PERMIT FEE ENCLOSED \$ _____

VI. LOCAL GOVERNMENT AGENCY TO COMPLETE THIS SECTION

ENVIRONMENTAL CONTROL APPROVALS

Plans are enclosed with this application	Required?	Approved	Date	Number	By
A. ZONING	yes_no				
B. FIRE DISTRICT	yes_no				
C. POLLUTION CONTROL	yes_no				
D. NOISE CONTROL	yes_no				
E. SOIL EROSION	yes_no				
F. FLOOD ZONE	yes_no				
G. WATER SUPPLY	yes_no				
H. SEPTIC SYSTEM	yes_no				
I. VARIANCE GRANTED	yes_no				
J. OTHER	yes_no				

VII. VALIDATION - FOR DEPARTMENT USE ONLY

USE GROUP	BASE FEE
TYPE OF CONSTRUCTION	NUMBER OF INSPECTIONS

APPROVAL SIGNATURE \_\_\_\_\_

TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Estimated Cost of Construction: \$ \_\_\_\_\_

Building Permit Fee Schedule:

Valuation Cost and Permit Fees:

Birch Run Township hereby establishes the value of construction for a building permit to be calculated by using an appropriate table from the “Building Valuation Data” as prescribed in the Building Safety Journal published by the International Code Council. In the absence of the aforementioned data, the Township Board may appoint the Building Official to calculate the permit fees.

Building Permit Fees are hereby established at 100% of the fees as set forth in the schedule of permit fees in the following table. The fees are to be determined by the cost of construction, and to be as follows:

TABLE 1-A Building Permit Fees

Total Valuation	Fee
\$1.00 to \$500.00	\$100.00
\$501. 00 to \$2,000.00	\$100.00 for the first \$500.00 plus \$6.00 for each additional \$100.00, or fraction thereof, to and including \$2,000.00
\$2,001.00 to \$25,000.00	\$190.00 for the first \$2,000.00 plus \$15.00 for each additional \$1,000.00, or fraction thereof, to and including \$25,000.00
\$25,001.00 to \$50,000.00	\$535.00 for the first \$25,000.00 plus \$10.50 for each additional \$1,000.00, or fraction thereof, to and including \$50,000.00
\$50,001.00 to \$100,000.00	\$797.50 for the first \$50,000.00 plus \$7.50 for each additional \$1,000.00, or fraction thereof, to and including \$100,000.00
\$100,001.00 to \$500,000.00	\$1172.50 for the first \$100,000.00 plus \$6.00 for each additional \$1,000.00, or fraction thereof, to and including \$500,000.00
\$500,001.00 to \$1,000,000.00	\$3572.50 for the first \$500,000.00 plus \$5.00 for each additional \$1,000.00, or fraction thereof, to and including \$1,000,000.00
\$1,000,001.00 and up	\$6072.50 for the first \$1,000,000.00 plus \$4.00 for each additional \$1,000.00, or fraction thereof

Other Inspections and Fees:

1. Inspections outside of normal business hours.....

\$100.00 per hour 1 (minimum charge – two hours)
2. Reinspection fees assessed under provision of Section 109/R109.....

\$100.00 per inspection 1
3. Inspections for which no fee is specifically indicated .....

\$100.00 per inspection1 (minimum charge ½ hour)
4. Additional plan review required by changes, additions, or revisions to plans....

\$100.00 per hour 1 (minimum charge ½ hour)
5. For use of outside consultants for plan checking and inspections, or both.....

Actual costs 2

1. Or the total hourly cost to the jurisdiction, whichever is the greatest. This cost shall include supervision, overhead, equipment, hourly wages, and fringe benefits of the employees involved.

2. Actual costs include administrative and overhead costs
6. Surety Bond Fees (Refundable barring extra inspections / other charges)

1. Accessory Structure .....

\$200.00

2. Residential Homes / Additions.....

\$400.00

3. Commercial Developments.....

3% of cost of construction

The fees set forth in this section covers all of the inspections required under the most current Michigan Building Code, promulgated by the International Code Council, but does not include plumbing, mechanical, electrical, any other required inspections, or re-inspections required, caused or necessitated by poor workmanship, correction notices or by violations of the provisions and requirements of the Michigan Building Code’s. All re-inspections that are required or necessitated shall require the payment of an additional inspection fee as charged by the inspector having authority for the jurisdiction. Building or construction permit fees do not include the required fees for zoning, electrical, plumbing, or mechanical work; such fees are required as stated on those respective permit applications.

# ONE STORY WALL SECTION

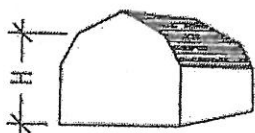
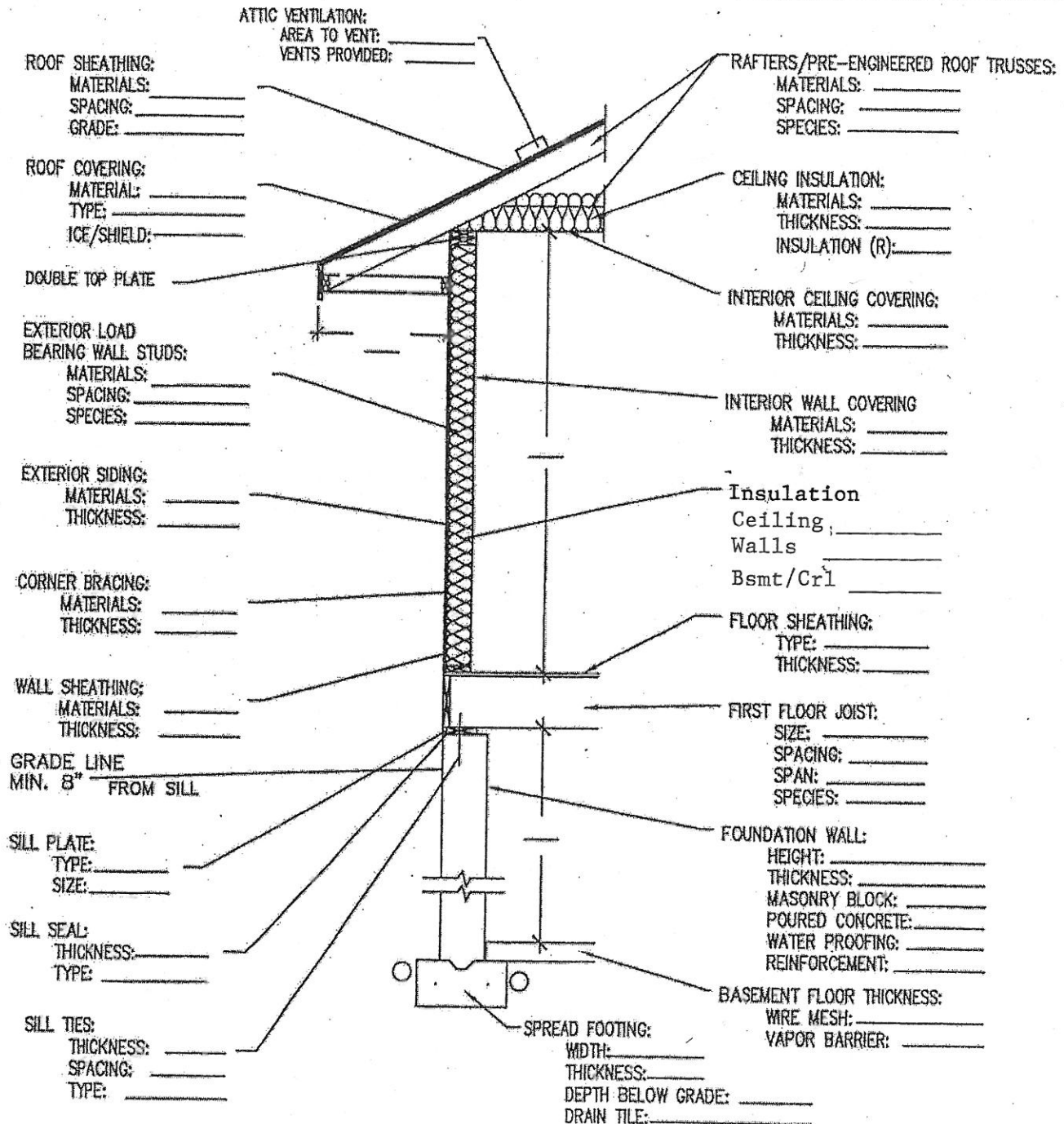
Job \_\_\_\_\_

DATE: \_\_\_\_\_

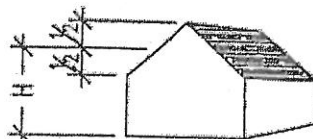
NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_



GAMBREL ROOF



GABLE ROOF



MANSARD ROOF



HIP ROOF

You must provide BUILDING HEIGHT \_\_\_\_\_ (mean height see above)

# POLE CONSTRUCTION

## UP TO 12' SIDE WALLS

NAME OF OWNER \_\_\_\_\_ TELEPHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

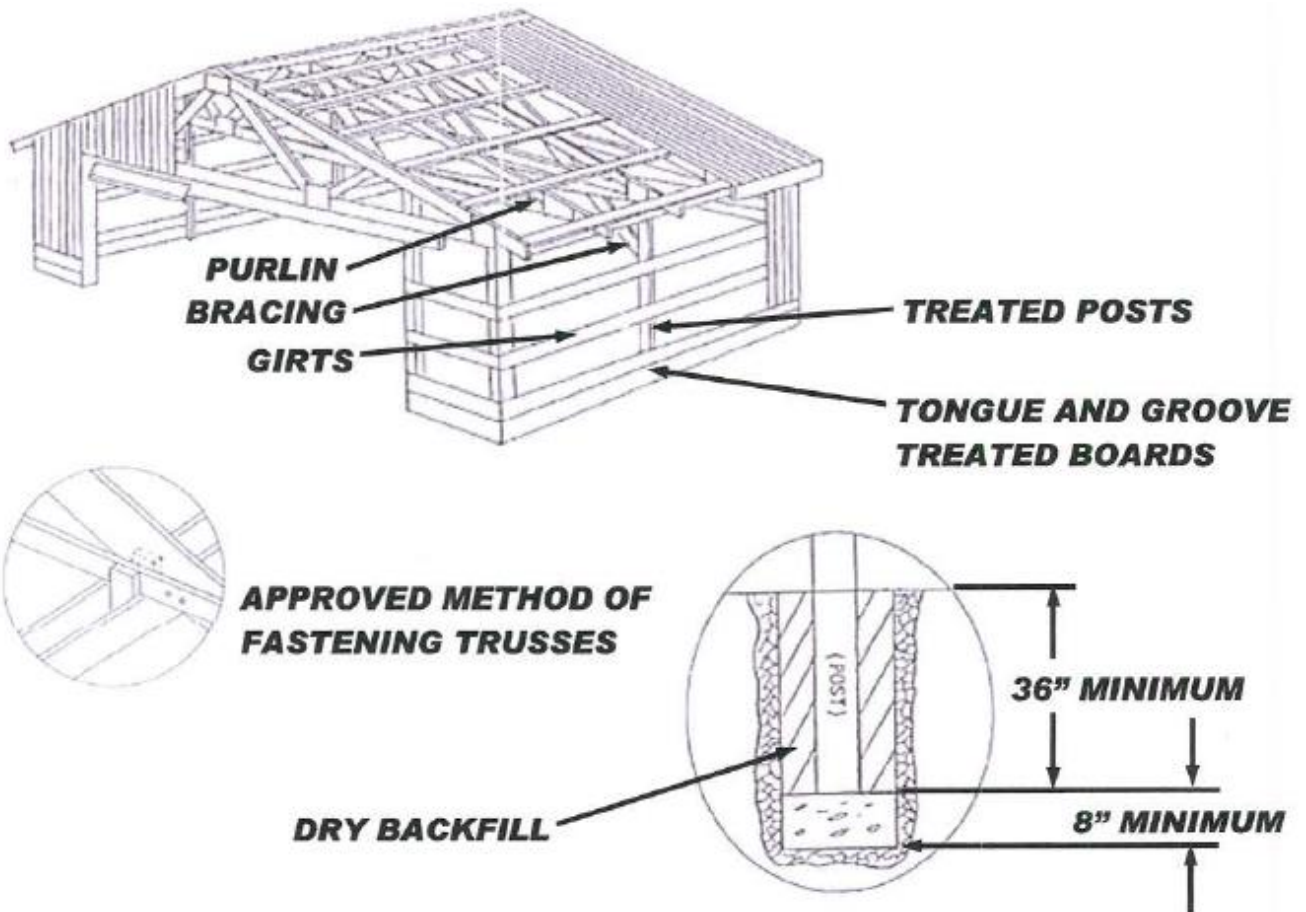
SIGNATURE OF OWNER \_\_\_\_\_ DATE \_\_\_\_\_

NAME OF  
CONTRACTOR \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

ADDRESS \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

SIGNATURE CONTRACTOR \_\_\_\_\_ DATE \_\_\_\_\_



SEE REVERSE SIDE

<u>Pole Spacing</u>	<u>Building Width</u>	<u>Pad Diameter</u>
8'	24'	12"
8'	26'	16"
8'	30'	18"
8'	36'	20"

<u>Beams</u>		
8'	24'	2 2" x 8"
8'	26'	2 2" x 8"
8'	28'	2 2" x 8"
8'	30'	2 2" x 10"

**SPECIFICATIONS:**

Roof Live Load 40 lbs./Sq.Ft.

Trusses:

Spacing\_\_\_\_\_o.c.

Purchased: Yes No

Building Size:\_\_\_\_\_

Main Door Header:

Size and Span\_\_\_\_\_

Posts are required to be stress tested and treated with a code approved material

Size and Spacing of Girts:

\_\_\_\_\_

Size and Spacing of Purlins:

\_\_\_\_\_

Height Grade to Eaves:

\_\_\_\_\_

Height Grade to Ridge:

\_\_\_\_\_

**FOOTING DETAILS** Depth of Embedment:

1/4 Length of Pole  
minimum of 48"

**CONCRETE PAD:**

Minimum 8" Thick  
2500 lb. Concrete

3 Inspections are required for pole structures.

1. Footing/prior to placenment of concrete

2. Rough In/prior to installing exterior veneer and after openings are flashed.

3. Final/after exterior veneer and overhead doors are installed.

\*\*Allow a minimum of a 24 hour advance notice for all inspections.

# COUNTY OF SAGINAW

**BRIAN J. WENDLING**  
**PUBLIC WORKS COMMISSIONER**

Governmental Center  
111 S. Michigan Avenue  
Saginaw, Michigan 48602-2086  
Phone 989-790-5258 • FAX 989-790-5259



## SOIL EROSION AND SEDIMENTATION CONTROL PERMITS APPLICATION INFORMATION AND INSTRUCTIONS

Attached is the application form for a Soil Erosion and Sedimentation Control permit. A permit is needed if the earth change:

1. disturbs more than one acre of land or
2. is within 500 feet of a lake or stream, including open county drains and water bodies over one acre of surface area or
3. is a parcel in a subdivision or development that was permitted after May 29, 2003, when that parcel changes ownership or type of earth change activity

Please review the form before filling in the required information. The entire form must be completed before submitting for processing.

Item 2 – refers to the location of the earth change or project

Item 3 – briefly describes the earth change; size includes the entire area disturbed, i.e. cut, fill, stockpile, etc.

Item 5 – be sure to list the responsible individual actually “on site”, along with the other information

Additional information and items to include with application:

1. One set of Soil Erosion and Sedimentation Control plans for engineered projects, or if required by the County Enforcing Agency
2. Site plan with additional information listed on page 2, or a soil erosion schedule for subdivision lots as detailed on page 4 & 5, for non-engineered projects.
3. Proof of ownership, included with legal description
4. Check for appropriate fees, payable to **SAGINAW COUNTY PUBLIC WORKS COMMISSIONER** based on the following schedule:

**Residential Permit**

Minor Permit (Less than 1 acre)

Major Permit (1 or more acres)

**Industrial/Commercial Permit**

Minor Permit (Less than 1 acre)

Major Permit (1 or more acres)

**Mining Operation Permit \***

Minor Permit (Less than 2 acres)

Major Permit (2 or more acres)

**Utility Permit**

Minor Permit (Less than 1 mile)

Major Permit (1 or more miles)

**Annual Renewal of Existing Permit**

Mining Permit

All other renewals

**Fee (Round up to the nearest ¼ acre)**

\$250.00

\$250.00 + \$150 per acre over one

\$400.00

\$400.00 + \$200 per acre over one

\$500.00

\$500.00 + \$50 per acre over two

\$300.00

\$300.00 + \$50 per mile over one

**Fee**

\$300.00

Same as initial fee

\*Mining operation includes all excavations for the purposes of removing and/or selling materials including the construction of ponds and/or lakes.

## **ITEMS TO BE INCLUDED IN THE SOIL EROSION AND SEDIMENTATION CONTROL PLAN**

1. A scaled drawing of the project, not more than 200 feet to the inch. For many projects this can be a non-engineered plan.
2. A legal description of the property, from the deed or tax statement.
3. Site location sketch or map, including property boundaries.
4. Proximity to lakes and streams, including open county drains.
5. The predominant land features and vegetation.
6. Contour intervals or slope description.
7. Description of soil types.
8. Show the boundaries or limits of the earth change(s). Includes excavation, fill stockpiling, grading.
9. Drainage patterns, where water leaves the site.
10. Timing and sequence of the earth changes. (Sample construction schedule available)
11. Description and location of the temporary and permanent erosion control measures.
12. How are the erosion control measures maintained and by whom?

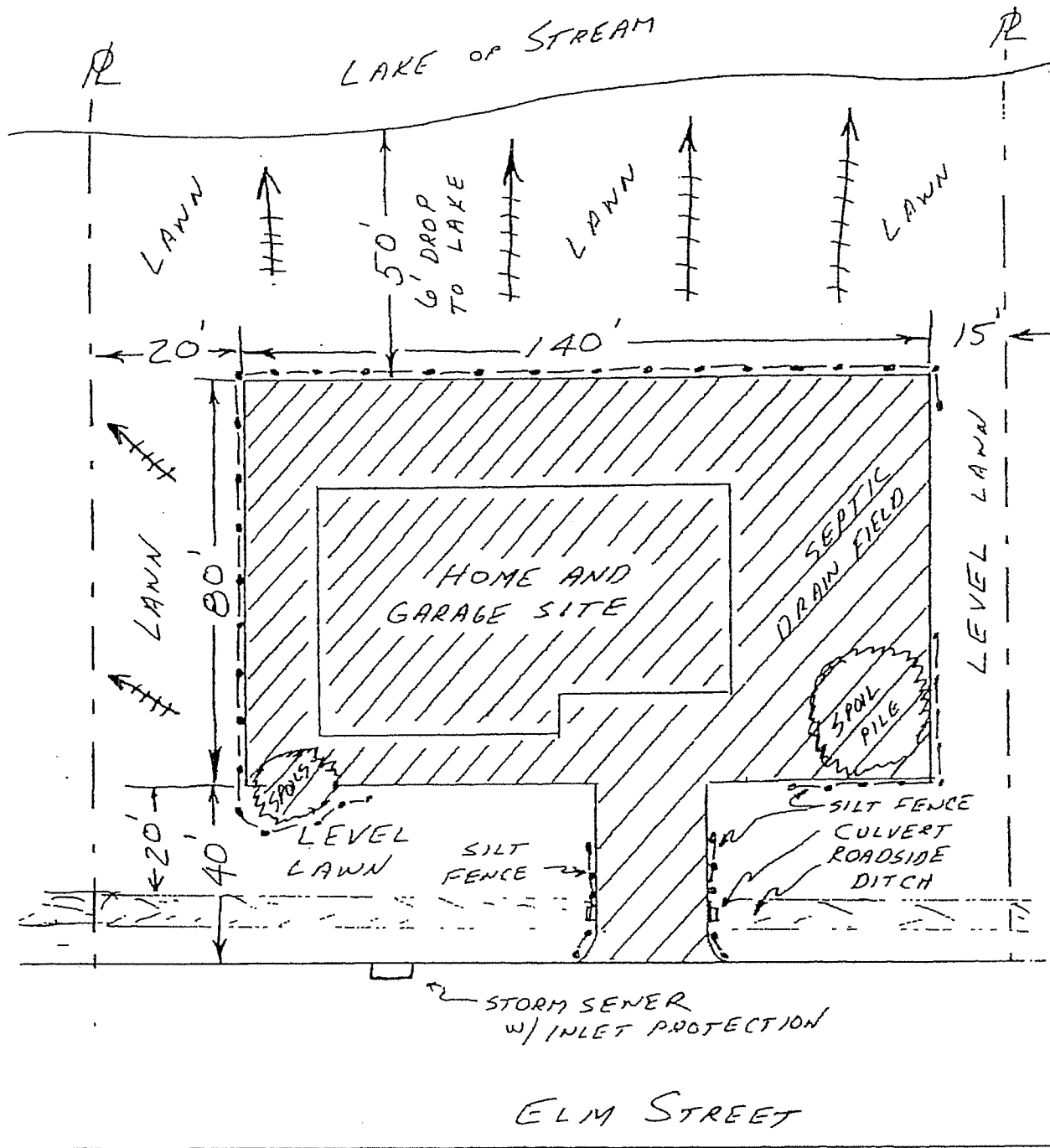
A worksheet and sample plan that shows how most of the items are included on a single sheet is included in this packet.

**Complete applications, supplemental information and fees should be mailed to:**


SAGINAW COUNTY PUBLIC WORKS COMMISSIONER  
111 S Michigan Ave  
Saginaw, MI 48602


**Projects started without a permit are in violation of the law and subject to double fees.**

## Example Site Plan

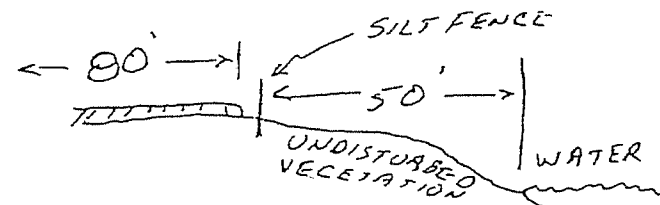


SOIL - SANDY LOAM

 INDICATES  
DIRECTION OF SLOPE

 INDICATES  
AREA OF  
EARTH CHANGE

●—●—●—● SILT FENCE



- FILL 2' ABOVE GRADE
- SIDE SLOPES 3H:1V OR FLATTER

← 140' →  
X- SECTIONS

## SCHEDULE

6/15 - INSTALL PERIMETER  
SEDIMENT CONTROLS

6/17 - GRADE SITE

6/17-9/10 - CONSTRUCTION  
OF HOME

9/15 - PAVE DRIVEWAY

9/15-9/20 - FINAL GRADE,  
SEED AND MULCH

REMOVE PERIMETER CONTROLS  
IF CROSS IS ESTABLISHED

## **Soil Erosion and Sedimentation Control Requirements For Subdivision House Construction**

1. Disturb the minimum area necessary for construction. Leave the maximum amount of vegetation undisturbed along curb and rear lot inlets.
2. Keep soil from eroding off the site by either:
  - a) maintaining a 20-ft buffer zone of mature vegetation along curb in flat areas, **or**
  - b) trenching in silt fence along the curb, **or**
  - c) Constructing and maintaining a sediment containment swale behind the curb.
    - i. If soil is put into the swale or buffer zone during construction, install trenched-in silt fence around the soil.
3. Protect the driveway from eroding into the street by either:
  - a) Installing a stone aggregate driveway immediately after backfilling basement or crawl space, **or**
  - b) Paving the driveway immediately after backfilling basement or crawl space.
    - i. Care should be taken to limit access to the aggregate or paved driveway.
    - ii. Park all vehicles on the street or on the aggregate/paved driveway; do not park any vehicles on bare soil.
4. Protect storm water inlets as follows:
  - a) Rear lot inlets: Install and maintain filter fabric or bag. Replace when covered with sediment. Make sure fabric covers the entire opening.
  - b) Street inlets: Install inlet protection and maintain on a regular basis to ensure proper drainage.
5. Any sediment or other material which gets into the street must be removed daily.
6. Landscaping: Apply top-soil, seed and mulch as soon as construction traffic in yard allows. The contractor must set a date by which seeding is to be completed.
  - a) If soil is seeded too late in the year for the yard to fill in with grass, install either:
    - i. A strip of mulch blanket along the curb and sidewalk, and enough mulch over the rest of the yard to prevent erosion rills, or
    - ii. Trenched-in silt fence along the curb and sidewalk. Leave silt fence in place until grass is established.

**SOIL EROSION SCHEDULE;** to be completed by developer or contractor. Fill in the blanks with an approximate date for each activity or with a schedule, i.e. Start within X days, weeks 1, 2, 3 etc.

1. Remove topsoil \_\_\_\_\_
2. Construct sediment swales \_\_\_\_\_ **or**  
Install trenched-in silt fence along curb \_\_\_\_\_
3. Construct and backfill basement/crawl space \_\_\_\_\_
4. Install aggregate stone driveway \_\_\_\_\_
5. Pave driveway \_\_\_\_\_
6. Seed and mulch yard \_\_\_\_\_
7. Install winter yard protection: Silt fence \_\_\_\_\_ **or**

Mulch blanket \_\_\_\_\_

For areas with public traffic, what measures will be used in street inlets to catch sediment without flooding streets?

\_\_\_\_\_

How will sediment be removed daily from street? \_\_\_\_\_

**Return this form to the Saginaw County Public Works Department as a portion of your Soil Erosion and Sedimentation Control Plan.**

**OFFICE USE ONLY**

**PERMIT APPLICATION  
for Part 91  
SOIL EROSION AND  
SEDIMENTATION CONTROL**

Permit Number
Date Issued
Expiration Date
File Number

**1. LANDOWNER**

Name			
Address	City	State	Zip Code
Area Code/Telephone Number	** Email Address		

**2. LOCATION**

Section	Town	Range	Township	City/Village	County
Subdivision	Lot No.	Tax ID Number/Parcel Number		Street Address	

**3. PROPOSED EARTH CHANGE**

Project Type:	<input type="checkbox"/> Residential	<input type="checkbox"/> Multi-family	<input type="checkbox"/> Commercial
	<input type="checkbox"/> Industrial	<input type="checkbox"/> Land Balancing	

Describe Project	Size of Earth Change (acres or square feet)
Name of <b>and</b> Distance to Nearest Lake, Stream, or Drain	Date Project to Start      Date Project to be Completed

**4. SOIL EROSION AND SEDIMENTATION CONTROL PLAN (Refer to Rule 323.1703)**

<b>Note: <u>  1  </u> complete set of plans must be attached.</b>	Estimated Cost of Erosion and Sediment Control
	Plan Preparer's Name and Telephone Number Area Code

**5. PARTIES RESPONSIBLE FOR EARTH CHANGE (GENERAL CONTRACTOR)**

Name <input type="checkbox"/> Landowner <input type="checkbox"/> Designated Agent	Company Name		
Address	City	State	Zip Code
Area Code/Telephone Number	** Email Address		

**6. PERFORMANCE DEPOSIT (If required by the permitting agency)**

Amount Required \$ _____	<input type="checkbox"/> Cash	<input type="checkbox"/> Certified Check	<input type="checkbox"/> Irrevocable Letter of Credit	<input type="checkbox"/> Surety Bond
Name of Surety Company				
Address	City	State	Zip Code	
Area Code/Telephone Number	** Email Address			

I (we) affirm that the above information is accurate and that I (we) will conduct the above described earth change in accordance with Part 91, Soil Erosion and Sedimentation Control, of the Natural Resources and Environmental Protection Act, 1994 PA 451, as amended, applicable local ordinances, and the documents accompanying this application.

Landowner's Signature	Print Name	Date
Designated Agent's Signature*	Print Name	Date

\* Designated agent must have a written statement from landowner authorizing him/her to secure a permit in the landowner's name.

\*\* Permit and receipt for fees sent via email for faster service.